

MitraClip™

Transcatheter Mitral Valve Repair

TAILORED. OPTIMIZED. PROVEN.
MITRACLIP™ G4



NT

NTW

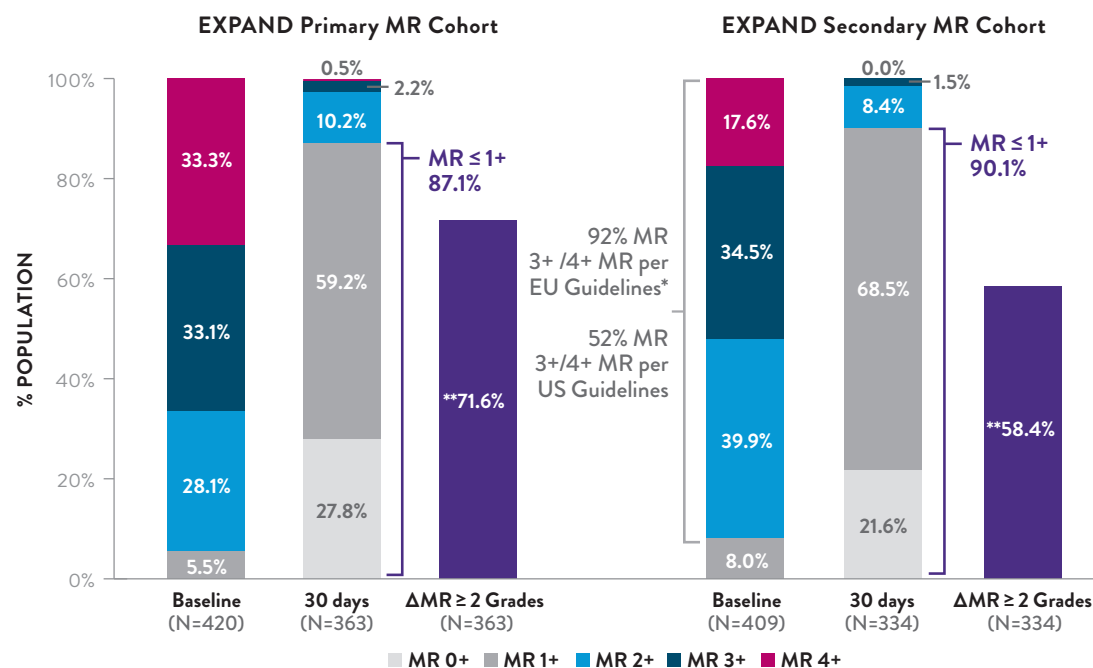
XT

XTW



HIGHEST MR REDUCTION REPORTED TO DATE¹

PROVEN MR REDUCTION TO 1+ OR LESS WITH TAILORED REPAIR¹



IMPLANT
RATE



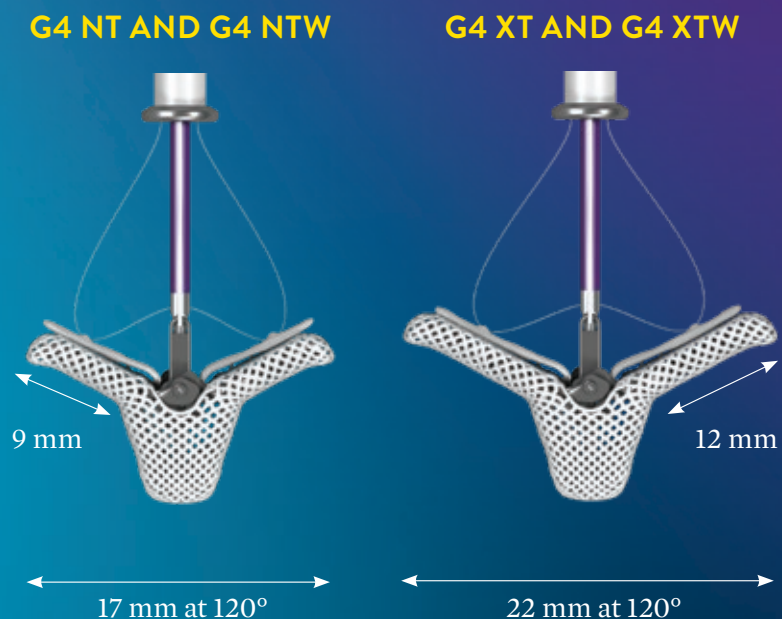
ACUTE PROCEDURAL
SUCCESS

¹von Bardeleben et al. ESC 2019

²**p=0.0002

² Information contained herein for **DISTRIBUTION outside of the U.S. ONLY**. Always check the regulatory status of the device in your region.

EXPANDED PORTFOLIO OF CLIP SIZES*



HIGHEST MR REDUCTION TO DATE¹

DESIGNED TO TAILOR AND FURTHER REDUCE REGURGITANT VOLUME
WITH A SINGLE CLIP



G4 NTW & XTW
INCREASE COAPTATION
AREA BY
~50%*

“

ALLOWS US TO TREAT PATIENTS WITH
1 CLIP MORE OFTEN THAN BEFORE.

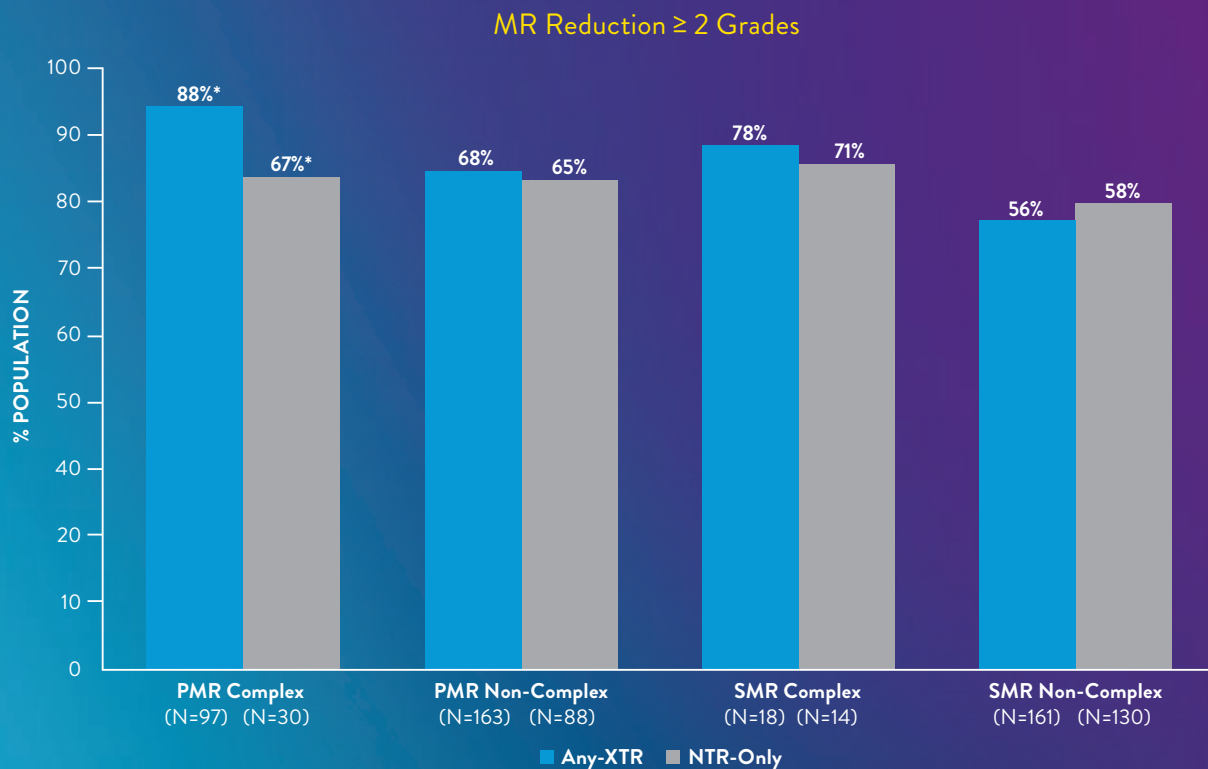
Echocardiographer with 6 years of
MitraClip experience, commenting
on MitraClip G4

The testimonial does not provide any indication, guide, warranty or guarantee as to the response patients may have to the treatment or effectiveness of the product or therapy in discussion. Opinions about the treatment discussed can and do vary and are specific to the individual's experience and might not be representative of others.

*Tests performed by and data on file at Abbott.

TREAT MORE PATIENTS WITH MORE OPTIONS^{1,2}

SIGNIFICANT MR REDUCTION IN SIMPLE AND COMPLEX ANATOMIES²



“LONG ARM CLIP USE WAS ASSOCIATED WITH IMPROVED MR REDUCTION FOR SEVERE BASELINE MR, smaller annular dimensions, larger prolapse gaps and complex disease in primary MR

— Cardiac Surgeon with over 10 years of MitraClip experience commenting on MitraClip NTR/XTR

*Statistically significant associations

TREAT MORE PATIENTS WITH MORE OPTIONS^{1,2}

ABILITY TO CHOOSE CLIP SIZE BASED ON EACH MV ANATOMY^{1,2,*}

ANATOMICAL CONSIDERATIONS	FAVORS G4 NTW	FAVORS G4 NT	FAVORS G4 XTW	FAVORS G4 XT
Leaflet Length < 9 mm	+	+		
Leaflet Length ≥ 9 mm			+	+
Broad Jet	+		+	
Smaller Valve		+		
Larger Valve	+		+	+

MitraClip G4 Clip Selection recommendations are based on the clinical experience of physicians. The EXPAND G4 observational study evaluates adherence to Clip Size Selection Recommendations and their associated outcomes.

“ YOU HAVE MULTIPLE CLIP OPTIONS
to treat different diseases on the MV, allowing
the ability to tailor the therapy for the disease
— *Interventional Cardiologist with over 10 years of
MitraClip experience commenting on MitraClip G4*

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CONFIRM AND OPTIMIZE LEAFLET GRASPING WITH CONTROLLED GRIPPER ACTUATION (CGA)^{*,**}

NEW GRIPPER LEVERS



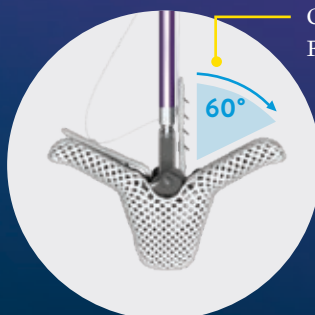
BOTH GRIPPERS LOWERED



ONE GRIPPER LOWERED



GRIPPERS DESIGNED TO DISTRIBUTE LEAFLET RETENTION FORCE
to grasp leaflet with confidence^{1,*}



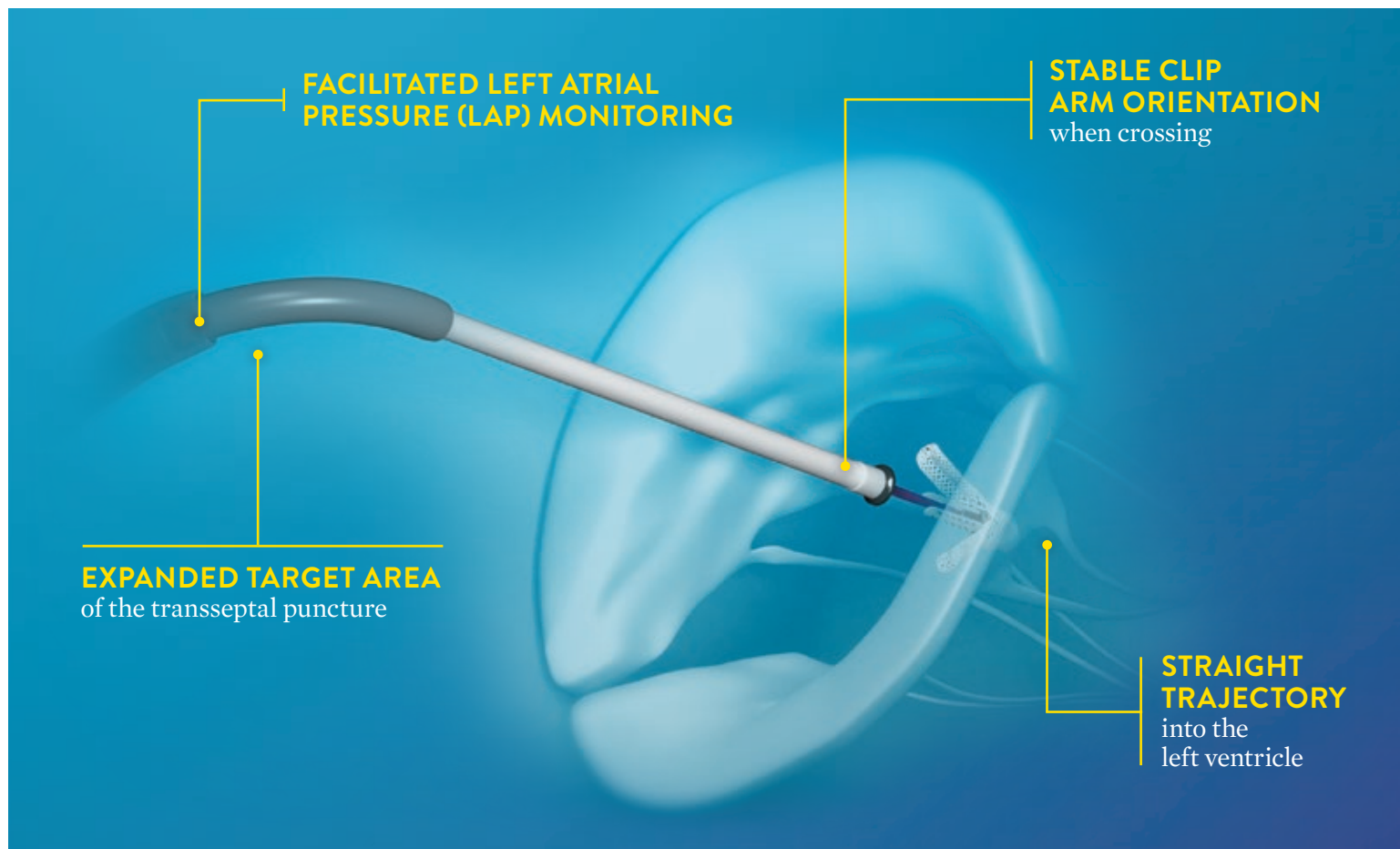
Gripper Designed to Facilitate Leaflet Insertion^{*}

^{*}Tests performed by and data on file at Abbott

^{**}MitraClip G4 IFU

PREDICTABLE PROCEDURE EXPERIENCE^{1*}

PRECISION AND CONTROL FROM DELIVERY SYSTEM
SPECIFICALLY DESIGNED FOR THE MV*



“

THE DELIVERY SYSTEM IS VERY STABLE

when advancing into the ventricle, keeping a straight trajectory

— *Interventional Cardiologist with over 10 years of MitraClip experience commenting on MitraClip G4*

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*Tests performed by and data on file at Abbott.

INCREASED PROCEDURE EFFICIENCY***

**13% REDUCTION IN
CLIPS IMPLANTED
PER PROCEDURE****



**1.4
IMPLANTED
CLIP RATE****

**11% SHORTER
PROCEDURAL
TIME****



**50 MIN.
AVERAGE
DEVICE TIME****

**“ IN OUR INSTITUTE, WE HAVE NOW
REDUCED DEVICE TIME TO ~20 MIN.**
Echocardiographer with 6 years of MitraClip
experience, commenting on MitraClip G4

SIMPLIFIED PROCEDURAL STEPS*

- 40% reduction in system preparation steps
- Simplified system deployment with reduced number of steps



* MitraClip G4 IFU

** Data file on Abbott

FIRST AND FOREMOST.

EVERY TIME. OVER TIME.

OVER 16



YEARS OF CLINICAL
EXPERIENCE*

OVER 100K



PATIENTS TREATED
WORLDWIDE*

OVER 30K



PATIENTS STUDIED
IN CLINICAL TRIALS*

MOST
EXPERIENCED



FIELD &
TRAINING TEAM

*Data on file at Abbott

MITRACLIP™ IS THE ONLY PROVEN TMV** THERAPY THAT GIVES YOU CONFIDENCE IN:

SAFETY

96.6% freedom from device-related complications at 12 months¹¹

SURVIVAL

- Lowest 30-day mortality reported to date in large scale studies¹
- Only MV Device shown to improve survival in HF patients with SMR¹³



DURABILITY

Only TMV device with proven sustained outcomes to 5 years as demonstrated by sustained MR reduction, improvement in heart failure symptoms, and left ventricle volumes³⁻¹²

EFFICACY

- 87% and 90% MR \leq 1+ at 30 day in PMR and SMR patients¹
- 99% MR \leq 2+ at 24 mths in SMR patients¹³

QUALITY OF LIFE

Highest improvement of health-related quality of life at 30 days reported to date¹

(Health-related quality of life measured by KCCQ Overall Summary score)

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1. Rottbauer W. D. Contemporary Clinical Outcomes with MitraClip™ (NTR/XTR) System: Core-lab Echo Results from +1000 Patient the Global EXPAND Study. Data presented at PCR 2020. **2.** Maisano F. Clip Selection Strategy and Outcomes with MitraClip™ (NTR/XTR): Evidence-Based Recommendations from the Global EXPAND Study. Data presented at PCR 2020. **3.** Feldman T. Randomized Comparison of Percutaneous Repair and Surgery for Mitral Regurgitation 5-Year Results of EVEREST II. *JACC*. VOL . 66 , NO. 25, 2015. **4.** Kar S. Five-year outcomes of transcatheter reduction of significant mitral regurgitation in high-surgical-risk patients. *Heart* 2018;0:1–7. **5.** Lim S. Five-Year Durability Results Of Transcatheter Mitral Valve Repair With the MitraClip® System in Patients With Severe Degenerative Mitral Regurgitation and Prohibitive Surgical Risk. Poster presented at ACC 2018. **6.** Feldman T. The EVEREST II REALISM Continued Access Study: Five-Year Outcomes in High Surgical Risk Patients. Data presented at PCR 2018. **7.** Feldman T. The EVEREST II REALISM Continued Access Non-High Risk Study: Mid- and Long-Term Follow-up in Surgical Candidates. Data presented at ESC 2017. **8.** Kalbacher et al. Long-term outcome, survival and predictors of mortality after MitraClip therapy: Results from the German Transcatheter Mitral Valve Interventions (TRAMI) registry. *International Journal of Cardiology* 277 (2019) 35–41. **9.** Adamo et al. Five year clinical outcomes after percutaneous edgeto-edge mitral valve repair: Insights from the multicenter GRASP-IT registry. *American Heart Journal*. **10.** Bedogni et al. Real world safety and efficacy of transcatheter mitral valve repair with MitraClip. Thirty-day results from the Italian Society of Interventional Cardiology (GISe) Registry Of Transcatheter Treatment of Mitral Valve RegurgitaTiOn (GIOTTO). *Cardiovascular Revascularization Medicine*. **11.** Surder et al. Impact of aetiology of mitral regurgitation on outcome after Mitraclip: lessons learned from MitraSwiss Registry. *EuroIntervention*. **12.** Buzzati et al. Mid-term outcomes (up to 5 years) of percutaneous edge-to-edge mitral repair in the real-world according to regurgitation mechanism: A single-center experience. *Catheter Cardiovasc Interv* 2019;94:427–435. **13.** Stone G. COAPT: A Randomized Trial of Transcatheter Mitral Valve Leaflet Approximation in Patients with Heart Failure and Secondary Mitral Regurgitation. Presented at TCT 2018.

CAUTION: This product is intended for use by or under the direction of a physician. Prior to use, reference the Instructions for Use, inside the product carton (when available) or at eifu.abbottvascular.com or at medical.abbott/manuals for more detailed information on Indications, Contraindications, Warnings, Precautions and Adverse Events.

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